

# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 7 OF 16  
 (check only one)  
☒ 11a ☐ 11b ☐ 11c ☐ 11d  
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)  
**WINNING WOMEN**

<b>A.</b> Full Name (Last, First, Middle Initial) <b>Myron Kaplan</b>		Date of Receipt M M / D D / Y Y Y Y 04 / 17 / 2014	
Mailing Address 551 Fifth Ave. 18th Fl City State Zip Code New York NY 10176		<b>Transaction ID : SA11AI.4284</b>	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 810.00	
Name of Employer Kleinberg Kaplan		Occupation Attorney	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 810.00	
<b>B.</b> Full Name (Last, First, Middle Initial) <b>Sue W. Kelly</b>		Date of Receipt M M / D D / Y Y Y Y 05 / 15 / 2014	
Mailing Address 187 Jay St. City State Zip Code Katonah NY 10536		<b>Transaction ID : SA11AI.4292</b>	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00	
Name of Employer N/A		Occupation Retired	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 1000.00	
<b>C.</b> Full Name (Last, First, Middle Initial) <b>John Liew</b>		Date of Receipt M M / D D / Y Y Y Y 04 / 08 / 2014	
Mailing Address 2 Greenwich Plaza 3rd Fl City State Zip Code Greenwich CT 06830		<b>Transaction ID : SA11AI.4278</b>	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 5200.00	
Name of Employer AQR Capital		Occupation Fund Manger	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 5200.00	
<b>SUBTOTAL</b> of Receipts This Page (optional).....		7010.00	
<b>TOTAL</b> This Period (last page this line number only).....			